

NORFOLK COMMUNITY HEALTH IMPROVEMENT PLAN

Safe Communities

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PUBLIC HEALTH APPROACH TO SAFE COMMUNITIES

- What is a Public Health Approach to Safe Communities?
- Models for violence prevention using an epidemiological approach
 - Cure Violence Model
 - Cardiff Model
 - Self Healing Communities
 - Child First
- Community Program Examples
 - Baltimore Safe Streets Program
 - Milwaukee Homicide Review Commission
 - Fitness Improvement Training (FIT) Zones
 - Summer Night Lights
 - Turning Empty Lots into Green Space

WHAT IS A PUBLIC HEALTH APPROACH TO SAFE COMMUNITIES?

WHAT IS A PUBLIC HEALTH APPROACH TO SAFE COMMUNITIES?

- 1979 Surgeon General's Report Identified violent behavior as a significant risk to health.
- 1983 CDC established the Violence Epidemiology Branch, which later became the Division of Violence Prevention.
- Ongoing law enforcement and public health agencies working together to address existing problems and prevent problems before they start.
- Emphasis on data analysis, collaboration, community engagement and problem solving.

"The greatest deterrent to crime and violence is not a community saturated with cops — it is a neighborhood alive with residents. The concept is that a healthy community would be, in fact, a safe community. Whoever controls a neighborhood's public spaces controls the quality of life in that neighborhood, that control must rest with the residents." - Ronald Davis, director of the U.S. Department of Justice's Office of Community Oriented Policing Services (COPS) and former police chief of the East Palo Alto Police Department

WHAT IS A PUBLIC HEALTH APPROACH TO SAFE COMMUNITIES?

- Define and monitor the problem
- Identify risk and protective factors
- Develop and test prevention strategies
- Ensure widespread adoption

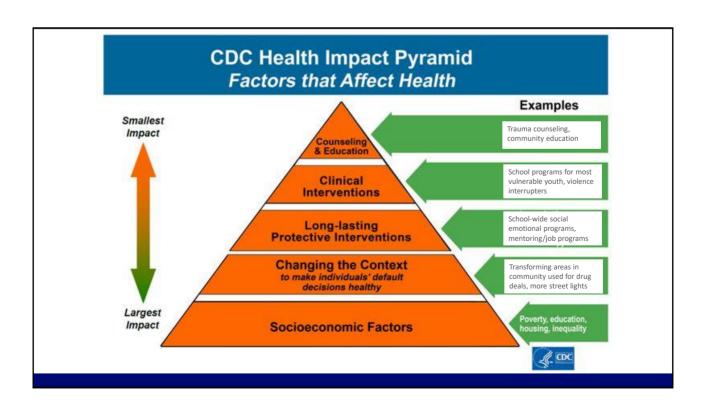
Source: Center for Disease Control and Prevention, "The Public Health Approach to Violence Prevention"

WHY USE A PUBLIC HEALTH APPROACH TO SAFE COMMUNITIES?

- · Violence shares similar characteristics as epidemics
 - Infectious/contagious transmitted through behavior
 - Geographically crime clusters typically match disease clusters
 - Violence can directly affect physical health; researchers have drawn a connection between fear of crime and shorter life expectancy

"Traditionally, the United States has relied on law enforcement and criminal justice to handle violence. Increasingly, police chiefs, probation officers, and mayors are insisting that we cannot arrest our way out of this problem—they cannot do it alone." - Addressing the Intersection: Preventing Violence and Promoting Healthy Eating and Active Living

MODELS FOR VIOLENCE PREVENTION USING AN EPIDEMIOLOGICAL APPROACH



CURE VIOLENCE MODEL

- Understands that violence persists despite external punishment or moral judgment
- People are not to be blamed for this epidemic, but are instead the number one resource in countering the problem
- Enlists members of the community, including former gang members, to help with reducing violence
- Prevents violence through a three-prong approach:
 - 1) Interrupt transmission
 - 2) Identify and change the thinking of highest potential transmitters
 - 3) Change group norms
- Also requires
 - · Data and monitoring
 - Extensive training of workers
 - Partnership with hospitals

Source: http://cureviolence.org/the-model/the-model/



CARDIFF MODEL FOR VIOLENCE PREVENTION

- Multiagency partnership that combines anonymous data from hospitals with law enforcement data to guide violence prevention
- Reception staff in emergency departments are trained to ask basic questions about the nature and location of the violence, the date and time of the incident, and the weapon type
- Information is stripped of identifiers, entered into a database and shared with a crime analyst, who then combines the information with police data to generate maps and summaries of violent incidents.
- Potential interventions
 - Police can patrol routes and use closed-circuit television systems in the most problematic areas
 - Buses can make more frequent late-night stops to avoid overcrowding at certain locations
 - Local authorities can require a construction site near an alcohol outlet to secure pallets of building supplies that are being used as weapons

After implementing these interventions, Cardiff saw a 32% relative reduction in assault-related injuries recorded by police over the study period of more than 4 years when compared with 14 similar cities.

SELF HEALING COMMUNITY MODEL

- Developed in Washington State in the 1990s
- Helps communities build their own capacity to define and solve problems by creating new social norms
- Addresses issues like domestic violence, school dropouts, youth substance abuse, and others that impact families and children
- Incorporates low-cost, locally promoted, sustainable solutions

Focuses on engaging the public, inspiring innovation, supporting peer helping, easing the daily stress burden of parents and promoting change in all of the systems that serve them so that together communities can better protect and nurture the next generation

SELF HEALING COMMUNITY MODEL (CONT.)

- Three properties:
 - Partners Funders, subject matter experts, service providers and community members
 - Principles
 - 1) inclusive leadership;
 - (2) learning communities;
 - (3) emergent capabilities;
 - (4) engagement informed by neuroscience, epigenetics, adverse childhood experience and resilience research (NEAR);
 - (5) right-fit solutions;
 - (6) hope and efficacy
 - Process:
 - Leadership expansion
 - Focus
 - Learning
 - Results



SELF HEALING COMMUNITY MODEL RESULTS

- Empowered leaders to think about the system as a whole, not just their part of the system.
- Over 10 to 15 years in Cowlitz Co., Wash.:
 - Births to teen mothers went down 62% and infant mortality went down 43%;
 - Youth suicide and suicide attempts went down 98%;
 - Youth arrests for violent crime dropped 53%;
 - High school dropout rates decreased by 47%;
 - Similar results were seen in other counties.

Youth arrests for violent crime dropped 53%

CHILD FIRST



- Evidence-based model that uses home visits and a network of community services
- Aims to identify children and families with serious challenges (at the earliest possible time) and connect them to well-integrated community-based resources to help them deal with the source of the stress directly
- Unique among home-visiting models because it features a skilled mental health specialist as a leading part of the team
- Mission: Child First helps to heal and protect young children and families from the
 effects of chronic stress and trauma by fostering strong, nurturing, relationships,
 and connecting families with needed services.

THE CHILD FIRST MODEL

- Combines comprehensive, coordinated services, psychotherapeutic intervention for child and caregivers, and increasing adult self-regulation and executive functioning in a single model, resulting in long-term positive outcomes for children and families.
- Organizational structure consists of:
 - National Program Office
 - State Lead Agencies
 - Affiliate Agencies
 - Child First Team Structure (within Affiliate Agencies)
 - · Community Advisory Boards
- A Child First Team visits with one time per week in the home.
- The Team is made up of one Child Development Specialist, who understands children's behavior, relationships, and learning, and one Care Coordinator, who knows about services and supports in your community.
- The Team works as the parent/caregivers' partner, listening closely to understand what is important to them, their child, and their family. The Team and parent/caregiver will plan together, and then work together to improve family life.
- The Care Coordinator will partner with the parent/caregiver to help connect you with many other services their family may need (like food, housing, childcare, health care, and job training).

CHILD FIRST RESULTS

- Decrease in child behavioral problems
- Improvement in child social skills
- Improvement in child language development
- Strengthening of the parent-child relationship
- Decrease in maternal depression
- Decrease in parent stress

From October 2011- September 2013, 88.6% of children and families showed improvement in at least one area, 69.4% in at least two areas, and 54.1% in at least three areas.



COMMUNITY PROGRAM EXAMPLES

BALTIMORE SAFE STREETS PROGRAM

- Implemented in four of Baltimore's most violent neighborhoods
- Built off of Cure Violence model
- A community mobilization and outreach program designed to combat shootings and homicides.
- Targets high-risk youth aged 14 to 25, through outreach and service connection, and the community as a whole, through a media campaign and community mobilization.
- Based on five core components:
 - Community coalition building
 - Street outreach to at risk youth
 - Public education
 - Clergy involvement
 - Law enforcement collaboration.

Emphasizes the delivery of a unified message that violence is no longer acceptable through community organization and public education.

SAFE STREETS RESULTS

- Safe Streets was associated with 5.4 fewer homicide incidents and 34.6 fewer nonfatal shooting incidents, on average, across all program sites during 112 months of observation after implementation of the program.
- All four intervention neighborhoods showed statistically significant reductions in nonfatal shootings after program implementation, and two neighborhoods showed statistically significant reductions in homicides.



MILWAUKEE HOMICIDE REVIEW COMMISSION

- Collaboration of criminal justice professionals and community service providers that regularly exchanges information about the city's homicides and other violent crimes to identify methods of prevention from both public health and criminal justice perspectives
- · Three goals:
 - Better understand the nature of homicide through strategic problem analysis
 - Develop innovative responses to the problem of homicide
 - Strategically focus limited enforcement and intervention activities on identifiable risks such as violent crime hot spot areas, highly active violent offenders, and repeat victims
- Created a data hub where researchers and law enforcement can look holistically at individuals and neighborhoods that have frequent contact with the criminal justice system
 - Arrest, pretrial and health department data from the city of Milwaukee
 - Data are stripped of identifiers and made anonymous
 - Allows for regular feeds of updated data as well as new data sets, such as workforce development and department of corrections data

Milwaukee Homicide Review Commission interventions led to a 52% decrease in the monthly homicide rate in the treatment districts compared to a 9.2% decrease in the monthly homicide rate in the control districts.

REVIEW COMMISSION

FITNESS IMPROVEMENT TRAINING ZONES: EAST PALO ALTO POLICE DEPARTMENT

- Innovative initiative aimed at testing whether improvements in community health can help increase community safety in the city's most dangerous neighborhoods
- Implement health-related programs in public spaces that have been underused by residents and overtaken by gang members
- Interventions:
 - FIT Zone Gatherings events with exercise activities like walking tours, bicycling, Zumba, and field sports, as well as health presentations on such topics as healthy eating, cholesterol and diabetes, and female health
 - Painted murals so gang members wouldn't tag walls
 - Police ride bicycles along side teens and interacted with park visitors



SUMMER NIGHT LIGHTS

- Created by the Los Angeles mayor's Office of Gang Reduction and Youth Development to reduce violence that typically increases in the summer
- Targets a total of 32 locations across the city of Los Angeles
- Interventions
 - Keeping recreation centers and parks open between the hours of 7:00 p.m. and 11:00 p.m. throughout the summer months
 - Expands the menu of activities at each site beyond what is traditionally offered, bringing sports, arts and recreational activities, resource fairs, health screenings, workshops, jobs, and connections to resources that residents can utilize year round
 - Expanding youth programming
 - Employing at-risk youth
 - Using community intervention workers to help maintain cease-fires



In the 32 Summer Night Lights communities, there was a 15.4 percent reduction in gang-related crime from 2013 to 2014.

TURNING EMPTY LOTS INTO GREEN SPACE

- Philadelphia health and police agencies collaborated to share data on identifying locations associated with crime and disorder.
- Using this data, police officers discovered and reported vacant lots for greening as they patrolled the streets.
- Community leaders organize maintenance of the lots and community gatherings and sports events in them.
- Over time, the City of Philadelphia found that transforming empty lots strewn with debris and trash into well-kept spaces helped restore order and safety

The city's green lots represent "the best that comes from collaboration and community policing" by demonstrating that everyone plays a role in maintaining public safety. - Philadelphia Deputy Police Commissioner, Nola Joyce

TURNING EMPTY LOTS INTO GREEN SPACE: RESULTS

- Gun-related assaults significantly declined in areas around the lots that had been greened
- Vandalism and criminal mischief significantly decreased
- Residents reported feeling less stress and getting more exercise





RESOURCES

- Law Enforcement and Public Health Sharing Resources and Strategies to Make Communities Safer, Robert V. Wolf Center for Court Innovation, February 2012 http://www.courtinnovation.org/sites/default/files/documents/LawEnfPubHealth.pdf
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- Developing the Capacity to Understand and Prevent Homicide: An Evaluation of the Milwaukee Homicide Review Commission, USDOJ, 2013, https://www.ncirs.gov/pdffiles1/nij/grants/240814.pdf
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- Self Healing Communities A Transformational Process Model for Improving Intergenerational Health, Robert Wood Johnson Foundation, June 2016 http://www.rwif.org/content/dam/farm/reports/reports/2016/rwijt430225
- Child First http://www.childfirst.org/index.php
- Changing Blighted Urban Environments as an Evidence-Based Solution to Firearm Violence, Presentation, http://www.nationalacademies.org/hmd/~/media/Files/Activity%20Files/PublicHealth/PopulationHealthimprovementRT/16-JUN-16/Presentations/5%20Enas%20NAs%20Fooks/w%202016615b.pdf
- $\hbox{\color{red}\bullet} \quad \text{Miami-Dade Violence Intervention Project -} \\ \underline{\text{http://www.miamidade.gov/miamidadevip/home.asp}}$
- Evaluation of Baltimore's Safe Streets Program, Johns Hopkins Bloomberg School of Public Health, January 2012, http://www.rwjf.org/content/dam/web-assets/2012/01/evaluation-of-baltimore-s-safe-streets-program